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CONFIRMATION NO. 6363

<b>SERIAL NUMBER</b> 10/829,556	<b>FILING OR 371(c) DATE</b> 04/22/2004 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3766	<b>ATTORNEY DOCKET NO.</b> 214001-00988-2
<b>APPLICANTS</b> Mingui Sun, Pittsburgh, PA; Robert J. Sciabassi, Pittsburgh, PA; Marlin H. Mickle, Pittsburgh, PA;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/164,517 06/06/2002 PAT 6,847,844 <i>CHL 7/21/06</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none CHL 7/21/06</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 06/26/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Carl H. Lays</i> <i>CHL</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 8
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 003705				
<b>TITLE</b> Method of data communication with implanted device and associated apparatus				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	